Hous 1
Tasks and Timelines
Division II - Medicaid Expansion DRAFT

n.	•		F.CC - 41	A ductateductive	Plan			
			Effective	Administrative		1115 Maiyor	Systems Changes - ACS/Other	Other
Bill Section	Description	Staff Person Assigned	Date(s)	Rules	Amendment	1115 Walver	T19, IABC, MMIS, (check aid	Other
Section 5, Page 3,			7/4/0005	\/	No	Yes	type for MHIs)	
Lines 1-6	Ages 19-64	Lucinda Wonderlich-Fuller	7/1/2005	Yes	INO	1162	T19, IABC, MMIS, (check aid	·
Section 5, Page 3,			7/4/0005		No	Yes	type for MHIs)	
Lines 7-16	200% FPL	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	1168	T19, IABC, MMIS, (check aid	
Section 5, Page 3,	Family Planning Eligibles may		7/4/0005	Vaa	No	Yes	type for MHIs)	
Lines 17-23	also be eligible	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	1 65	type for wirtis)	
Section 5, Page 3,	300% FPL OB & Newborn			ļ			T19, IABC, MMIS, (check aid	
Lines 24-35 and	Care with deductions to 200%		7/4/0005	\	No	Yes	type for MHIs)	•
Page 4, Lines 1-5	FPL	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	res	T19, IABC, MMIS, (check aid	
Section 5, Page 4,		l	7/4/000E	 N1=	No.	Yes	type for MHIs)	
Lines 6-12	Enrollment Cap	Lucinda Wonderlich-Fuller	7/1/2005	11/0	INO-	res	T19, IABC, MMIS, (check aid	
Section 5, Page 4,	Group Health Insurance		71410005	\/	No	Yes	type for MHIs)	
Lines 13-19	Access - not eligible	Lucinda Wonderlich-Fuller	7/1/2005	res	No	162	T19, IABC, MMIS, (check aid	
Section 5, Page 4,	Intake: County General	<u> </u>	7/4/0005	J.,_	No	Yes	type for MHIs)	
Lines 20-23	Assistance Director	Diane Darnielle	7/1/2005	INO	INO	162		
Section 5, Page 4,	Intake: Sub-Contracting		4				T19, IABC, MMIS, (check aid	
Lines 24-30		Diane Darnielle	7/1/2005	No .	No	Yes	type for MHIs)	
Section 6, Page 5,								
Lines 1-3	Inpatient	P. C. Keen	7/1/2005	Yes	No	Yes	MMIS	
Section 6, Page 5,							· .	
Lines 4-6	Outpatient/NIPS	P. C. Keen	7/1/2005	Yes	No	Yes		
Section 6, Page 5,							ļ	
Lines 7-9	Physician/ARNP	Marty Swartz	7/1/2005	Yes	No	Yes		
Section 6, Page 5,				1]	
Lines 10-11	Dental	Cathy Coppes	7/1/2005	Yes	No	Yes	·	
Section 6, Page 5,					İ	Li		
Lines 12-15-	Pharmacy thru Hospital	P. C. Keen	7/1/2005	Yes	No	Yes		
Section 6, Page 5						1.]	
Lines 16-19	Transportation	Sue Stairs	7/1/2005	Yes	No	Yes		
Section 6, Page 5,	Medical Exam, Personal	Lucinda Wonderlich-						
Lines 20-35	Health Improvement Plan,	Fuller/Marty Swartz			1		Development of Web-Based	
İ	Health Risk Assessment		3/1/2006	Yes	No	Yes	System	
Section 6, Page 6,	Health Risk Assessment	Lucinda Wonderlich-		<u>l.</u>	1			
Lines 1-12		Fuller/Marty Swartz	3/1/2006	Yes	No	Yes		
Section 6, Page 6,				<u> </u>	1	L		
Lines 13-24		Marty Swartz	3/1/2006	Yes	No	Yes		
Section 6, Page 6,	Free/Discounted Presc.]. .				
Lines 25-30	Drugs	Susan Parker	7/1/2006	NO	No	No	<u> </u>	
	1						Develop System? Contract with	
Section 6, Page 6,	1	Jennifer Steenblock/Debbie	=1410000	<u> </u>		. .	Mercy Nurse? Medical	
Lines 31-35	Medical Information Hotline	Johnson	7/1/2006	INO	No	No	Information Hotline	

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Tasks and Timelines
Division II - Medicaid Expansion DRAFT

								
Section 6, Page 7,	Other Services Still Available	No Impact - Statement only		.	.			İ
Lines 1-5			7/1/2005	No	No	No		
Section 6, Page 7,					<u> </u>		· .	
Lines 6-12		P. C. Keen	7/1/2005	Possibly	No	Yes		
Section 7, Page 7,	Broadlawns, UIHC, MHIs	P. C. Keen			l			ļ
Lines 15-27			7/1/2005	Yes	No	Yes	MMIS	
Section 7, Page 7,								
Lines 28-31		Patti Ernst-Becker	7/1/2005	Yes	No	Yes		
Section 7, Page 7,	Claims filed within 20 days	Jim Taylor			l.,			
Lines 32-35			7/1/2005	Yes	No	Yes		
Section 7, Page 8,	Coverage denial for refusal to							İ
Lines 1-4	apply	No Impact - Statement only	7/1/2005	No	No	Yes	No	
	Broadlawn's may require co-	No Impact - Statement only						
Lines 5-14	pays or premiums and may	Two impact - otatement only						
Lines 5-14	deny care if not financially							
	participating		7/1/2005	no .	No No	Yes	no	
Section 8, Page 8,							Copy of MEPD - Separate T19	
Lines 17-20	Monthly premiums	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	Yes	premium billing system, IABC	
Section 8, Page 8,						,		
Lines 21-24	hawk-i deductions	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	Yes		
	Four consecutive months of							j
Lines 26-28	paid premiums	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	Yes		
Section 8, Page 8,	Premiums must be paid or no							i
Lines 29-33	services	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	Yes		
Section 8, Page 8,								
Lines 34-35	Co-payments	Lucinda Wonderlich-Fuller	7/1/2005	Yes	No	Yes	MMIS	
Section 8, Page 9,	Reduction for wellness							
Lines 2-6	activities	Lucinda Wonderlich-Fuller	7/1/2005	Possibly	No	Yes	Design by 3/15/06	
	Insurance Cost Subsidy							
Lines 10-14	Program	Anita Smith	3/15/2006	no	No	Yes	Design by 3/15/06	
Section 8, Page 9,			!					
	Healthcare Account Program	Dennis Janssen	3/15/2006	No	No	No ·	none	
Secction 9, Page 9,	Division of Insurance -							
Lines 29-35 and	Recommendation for							Ī
	expansion population	Dennis Janssen	7/1/2005	yes	No	No	none	
Section 9, Page 10,	General assembly must	`						
Lines 4-8	authorize new services	No Impact - Statement only	7/1/2005	no	No	No	none	
	Clinicians Advisory Panel -							
	Recommendations for	`						
Section 9, Page 10,	changes to scope and			}				
Lines 9-15	duration	No Impact - Statement only	7/1/2005	No	No	No	none	
Section 9, Page 10,	No new providers unless there			-				
Lines 16-20	is funding	No Impact - Statement only	7/1/2005	No	No	No	none	
L	<u> </u>							

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Tasks and Timelines
Division II - Medicaid Expansion DRAFT

	Access to provider network limited by funding	No Impact - Statement only	7/1/2005	No	No	No	none	<u></u>	
Section 10, Page 10, Lines 29-33	Certified local matching funds	Patti Ernst-Becker/Dean Wheeler	7/1/2005	no	no	no	none		
Section 10, Page 10, Lines 34-35 and Page 11, Lines 1-4		Patti Ernst-Becker/Dean Wheeler	7/1/2005	Yes	yes	no	none		
	DSH/GME Distribution	Patti Ernst-Becker/Dean Wheeler	7/1/2005	Yes	yes	no	none		

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Tasks and Timelines
Division III - Rebalance LTC DRAFT

			Effective	Administrative	Plan		4.00/045	Other
Bill Section	Description	Staff Person Assigned	Date(s)	Rules	Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
Section 11, Page 11,	×	Jennifer Steenblock/Eileen		'			None	
Lines 24-30	Three or more ADLs	Creager	7/1/2005	yes	no	yes	None	
Section 11, Page 11,		Jennifer Steenblock/Eileen					None	
	Cognitive skills impaired	Creager	7/1/2005	yes	no	yes	None	
Section 11, Page 11,								
Lines 35 and Page		Jennifer Steenblock/Eileen					None	
	Dependency established	Creager	7/1/2005	yes	no	yes	None	
Section 11, Page 12,		Jennifer Steenblock/Eileen	=,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				None	
		Creager	7/1/2005	yes	no	yes	None	
Section 11, Page 12,		Jennifer Steenblock/Eileen	=///0005				None	
		Creager	7/1/2005	yes	no	yes	None	
	NF LOC-HCBS, but HCBS							
	services not available or							
	HCBS not cost effective-NF				•			
	admission based on 6/30/05	Jennifer Steenblock/Eileen	7/4/0005				None	
		Creager	7/1/2005	yes	no	yes	None	
		Debbie Johnson/Eileen	1/1/07 Report			1,0	None	
	HCBS/MR services	Creager	Due	no	no	no	None	
	Plan to enhance HCBS		7/1/07 Report					
Lines 17-26	services for ICF/MR residents	Debbie Johnson	Due	no	no	no	None	
Section 13, Page 13,	HCBS services - 300 children	Lin Christensen, Mary					1	
	(max.)	Mohrhauser	7/1/2005	yes	no	1915C	T19, MMIS, IABC, ISIS	
					*			
Section 13, Page 13,								
Lines 24-35 and	PMIC LOC - VETOED BY	Lin Christensen, Mary						
		Mohrhauser	7/1/2005	yes	no	1915C		
	Serious mental illness or						·	
Section 13, Page 14,	emotional damage - VETOED	Lin Christensen, Mary						
Lines 2-6	BY SENATE	Mohrhauser	7/1/2005	yes	no	1915C		
Section 14, Page 14,	New Medicaid services - case	Eileen Creager/Michaela					1,010	
Lines 8-15	mgmt, for frail elderly	Funaro	7/1/2005	yes	no	no	ISIS	
		Eileen Creager/Michaela	·				Name	
Lines 16-24	federal matching funds	Funaro	7/1/2005	no	no	no	None	
			7/1/05 - Also					
Section 14, Page 15,		Eileen Creager/Michaela	1/1/06 Report				B 1 b 4/4/00	
Lines 1-7	Sole source contract or RFP?	Funaro	Due	no:	no	no	Report by 1/1/06	
			1	<u> </u>	<u> </u>	<u> 1 ·</u>	<u> </u>	

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Tasks and rimelines Division IV - Health Promotion Participation

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	•		Effective	Administrative	Plan			
Bill Section	Description	Staff Person Assigned	Date(s)	Rules	Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
Section 15, Page 15,								
Lines 12-16 - MHI							T40 1400 1410 1010	
Services	Medicaid eligible 7/1/05	Lucinda Wonderlich-Fuller	7/1/2005	yes	no	yes `	T19, IABC, MMIS, ISIS	
Section 15, Page 15,	Dietary Counseling - weight					j		
Lines 17-25	problems 7/1/06	Jennifer Steenblock	7/1/2006	no	no	no		
Section 15, Page 15,	Electronic Medical Records						,	ł
Lines 26-34	10/1/06	Jennifer Steenblock	10/1/2006	no	no	no		
Section 15, Page 15,			}					
Lines 35 and Page	Provider Incentive Payments	Jennifer Steenblock/Marty	[Í	ľ			ļ
16, Lines 1-5	1/1/07	Swartz	1/1/2007	yes	yes	no	MMIS	
	MR/DD recipients - needs							
Section 15, Page 16,	being met? Work with UI	Jennifer Steenblock/Eileen					B	
	1/1/07 - Report Due	Creager	1/1/2007	no	no	no	Report Due	
Section 15, Page 16,	Smoking Cessation Program				1			
	7/1/07	Jennifer Steenblock	7/1/2007	no	no	no		
Section 15, Page 16,	12 & under Dental Home -	Jennifer Steenblock/Sally]				
	7/1/08	Nadolsky	7/1/2008	no	no	no		 -
Section 15, Page 16,	Quarterly Reports to MA		Quarterly			ļ	,	1
Lines 29-35 and	Project and Assessment	Jennifer Steenblock	Ending 9/30/06	no	no	no	Quarterly Reports	
Section 16, Page 17,		dominor eteoribles.			······			
Lines 6-14	Task Force Membership	Gene Gessow	7/1/2005	no	no	no	none	
	Task Force Membership				1		·	
Lines 15-20	Requirements	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 17,								
Lines 21-22	Definition of indigent care	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 17,								
Lines 23-26	Cost of indigent care	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 17,								-
Lines 27-28	Usual/Customary Charges	Gene Gessow	7/1/2005	no	no	no	none	
	Recip. Demographics - type of							
	service	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 17,		Gene Gessow			1			
Lines 32-34	From the state		7/1/2005	no	no	no	none	
Section 16, Page 17,	Funding Source	Gene Gessow						
Line 35 and Page	,			ŀ				
18, Lines 1-2			7/1/2005	no	no	no	none -	
Section 16, Page 18,								
Lines 3-6	Payments by Recipients	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 18,								
Lines 7-9	Payments in kind	Gene Gessow	7/1/2005	no	no	no	none	
	1: - /							

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Tasks and nmelines
Division IV - Health Promotion Participation

		·		AFT	·		,	
	Eight meetings each SFY beg.						none	1 1
Section 16, Page 18,	7/1/05 Six meetings prior to							1
	3/1/06	Gene Gessow	7/1/2005	no	no	no		
Section 16, Page 18,	Task Force requirements as	Gene Gessow						1 . 1
Lines 18-29	they pertain to the MA Project					4		1
	& Assessment Council					-		1
			7/1/2005	no	no	no	none	
	Initial Report due 3/1/06						·	
Section 16, Page 18,	Annual Reports due 12/31							
	each year	Gene Gessow	7/1/2005	no	no	по	none	
	DHS assistance - Price claims	Gene Gessow		,				
Line 35 and Page					ļ			
19, Lines 1-14	· ·							
13, LINGS 1514	·			no	no	no	none	
		·					<u> </u>	ļ

Hous 1 Tasks and 1 melines Division V - IME DRAFT

Bill Section	Description	Staff Person Assigned	Effective Date(s)	Administrative Rules	Plan Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
Section 15, Page 15,								
Lines 12-16 - MHI] .			
	Medicaid eligible 7/1/05	Lucinda Wonderlich-Fuller	7/1/2005	yes	no	yes	T19, IABC, MMIS, ISIS	
	Dietary Counseling - weight							
Lines 17-25	problems 7/1/06	Jennifer Steenblock	7/1/2006	no	no	no		
	Electronic Medical Records							
Lines 26-34	10/1/06	Jennifer Steenblock	10/1/2006	no	no	no		. =
Section 15, Page 15,								
	Provider Incentive Payments	Jennifer Steenblock/Marty						
16, Lines 1-5	1/1/07	Swartz	1/1/2007	yes	yes	no	MMIS	
	MR/DD recipients - needs							
Section 15, Page 16,	being met? Work with UI	Jennifer Steenblock/Eileen			1			
Lines 6-16	1/1/07 - Report Due	Creager	1/1/2007	no	no	no	Report Due	
Section 15, Page 16,	Smoking Cessation Program							
Lines 17-22	7/1/07	Jennifer Steenblock	7/1/2007	no	no	no		
Section 15, Page 16,	12 & under Dental Home -	Jennifer Steenblock/Sally			ľ			
Lines 23-28	7/1/08	Nadolsky	7/1/2008	no	no	no		
Section 15, Page 16,	Quarterly Reports to MA	\\						
Lines 29-35 and	Project and Assessment		Quarterly					
Page 17, Lines 1-3	Council	Jennifer Steenblock	Ending 9/30/06	no	no .	no	Quarterly Reports	
Section 16, Page 17,								
Lines 6-14	Task Force Membership	Gene Gessow	7/1/2005	no	no .	no	none	
	Task Force Membership							
Lines 15-20	Requirements	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 17,	-		1					
Lines 21-22	Definition of indigent care	Gene Gessow-	7/1/2005	no	no	no	none	
Section 16, Page 17,								
Lines 23-26	Cost of indigent care	Gene Gessow	7/1/2005	no	no .	no	none .	
Section 16, Page 17,								
Lines 27-28	Usual/Customary Charges	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 17,	Recip. Demographics - type of							
Lines 29-31	service	Gene Gessow	7/1/2005	no	no	no	none	
Section 16, Page 17,	Health Status	Gene Gessow						
Lines 32-34			7/1/2005	no	no	no	none	
Section 16, Page 17,	Funding Source	Gene Gessow			1			
Line 35 and Page			=///000=					
18, Lines 1-2			7/1/2005	no	no	no	none	
Section 16, Page 18,			7/4/0005					
Lines 3-6	Payments by Recipients	Gene Gessow	7/1/2005	no	no	no	none	· · · · · ·
Section 16, Page 18,			7/4/0005					
Lines 7-9	Payments in kind	Gene Gessow	7/1/2005	Itio	no	no	none	

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Tasks and amelines
Division V - IME DRAFT

	Eight meetings each SFY beg.						none	
Section 16, Page 18,	7/1/05 Six meetings prior to				Ì			
	0. 1100	Gene Gessow	7/1/2005	no	no	no		
Lines 18-29	Task Force requirements as they pertain to the MA Project & Assessment Council	Gene Gessow	7/1/2005		no	lno	none	
	0.4400		7/1/2003	110	110	110	Hone	
Lines 30-34		Gene Gessow.	7/1/2005	no	no	no	none	,
Section 16, Page 18, Line 35 and Page 19, Lines 1-14	DHS assistance - Price claims	Gene Gessow		no	no	no	none	

Hous I Tasks and Timelines Division VI - Governance DRAFT

			Effective	Administrative	Plan	4445 Walion	Systems Changes - ACS/Other	Other
Bill Section	Description	Staff Person Assigned	Date(s)	Rules	Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
	Medical Assistance (MA)	•						
Section 21, Page 21,	Projections & Assessment	·						
Lines 19-22	Council	Patti Ernst-Becker	7/1/2005	yes	no .	no .	none	
	Medical Assistance (MA)						·	
Section 21, Page 21,	Projections & Assessment						·	
Lines 23-34	Council Membership	Patti Ernst-Becker	7/1/2005	yes	no -	no .	none	
Section 21, Page 21,								
Line 35 and Page		į į						
22, Lines 1-5	Quarterly Meetings (minimum)	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,								
	Quorum Rules	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,								
Lines 10-11	Quarterly Cost Projections	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,						İ		
Lines 12-16	Annual Recommendations	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,						1		
Lines 17-35	Review annual audited	Patti Ernst-Becker	7/1/2005	yes	no	no	none	

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Tasks and rimelines
Division VII - Enhance Fed-State DRAFT

Bill Section	Description	Staff Person Assigned	Effective Date(s)	Administrative Rules	Plan Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
	Medical Assistance (MA)	Ctan Croon Addigned	2 4.0(0)	7,4		T		
	Projections & Assessment							
Lines 19-22	Council	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21 Page 21	Medical Assistance (MA) Projections & Assessment			•		·		
	Council Membership	Patti Ernst-Becker	7/1/2005	yes	no	no .	none	
Section 21, Page 21,								
Line 35 and Page			,					
22, Lines 1-5	Quarterly Meetings (minimum)	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,								
Lines 6-8	Quorum Rules	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,								
Lines 10-11	Quarterly Cost Projections	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,		,				1		ŀ
Lines 12-16	Annual Recommendations	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,								
Lines 17-35	Review annual audited	Patti Ernst-Becker	7/1/2005	yes	no	no	none	

House 1 Tasks and rimelines Division VIII - Limitations DRAFT

			Effective	Administrative	Plan			
Bill Section	Description	Staff Person Assigned	Date(s)	Rules	Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
	Medical Assistance (MA)							
Section 21, Page 21,	Projections & Assessment							
Lines 19-22	Council	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
	Medical Assistance (MA)							
	Projections & Assessment		=///0005					
		Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 21,		:						
Line 35 and Page	_ , , , , , , , , , , , , , , , , , , ,	Danie Santa Barbara	7/4/2005		20	20	none	
	Quarterly Meetings (minimum)	Patti Ernst-Becker	7/1/2005	yes	no	no	none .	
Section 21, Page 22,		Datti East Basker	7/4/2005		20	lno	Inone	1
		Patti Ernst-Becker	7/1/2005	yes	no	1110	none	
Section 21, Page 22,		D 45 5 4 Baabaa	7/4/0005		-	-	l none	j
	aradin taning a data to the same to the sa	Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,			7440005					
		Patti Ernst-Becker	7/1/2005	yes	no	no	none	
Section 21, Page 22,	I .		7/4/0007					
Lines 17-35	Review annual audited	Patti Ernst-Becker	7/1/2005	yes	no	no	none	

House .41 Tasks and Timelines Division IX - Corresponding Provisions DRAFT

Medicaid State ---

			Effective	Administrative	Plan			045
Bill Section	Description	Staff Person Assigned	Date(s)	Rules	Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
Section 20 Page 28								
Section 29, Page 28, Lines 17-35 and		"						
Page 29, Lines 1	Code Amended	No Impact	7/1/2005	no	no	no .		
Section 30, Page 29,				1			·	
	Code Amended	No Impact	7/1/2005	no	no	no		
	Code Amended - Counties still					·		
		NI- I	7/1/2005	no.	no	no		
Lines 17-35	charges at MHIs for adults Code Amended - Counties still	No Impact	17172003	110	1110	110		
Section 22 Page 30	responsible for per diem							
Lines 1-35	charges at MHIs for adults	No Impact	7/1/2005	no	no	no		
	Payment for Patient Care					,		
Lines 1-13	Segregated	No Impact	7/1/2005	no	no	no ′		
Section 34, Page 31,							ļ	,
Lines 16-21	SPA to end NF IGT	Jennifer Steenblock	7/1/2005	no	yes	no		
						ŀ		
	Enhanced base rate at UIHC: Federal \$ - Account for Health							
Lines 22-35 and	Care Transformation	Patti Ernst-Becker	7/1/2005	no	ves	no		
	7/1/03 to 6/30/05 Physician	Tatti Errist Books.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Lines 20-35 and	IGT at UIHC							
Page 33, Lines 1-5		Marty Swartz	7/1/2005	no	yes	no		
	Eliminate previous provision							
Page 6-8	on 6/30/05 - SPA	Marty Swartz	7/1/2005	no	yes	no		
	Report to Governor 12/31/05						Report to Governor and General	
	Opportunities to transition to		7/4/0005				Assembly by 12/31/05	
Lines 9-16	HCBS	Eileen Creager	7/1/2005	no	yes	no	Assembly by 12/3 1/03	
	NEOA Assessment				ves - Withdraw			
Castian 20 Dago 22	NFQA Assessment Withdraw waiver request and		Upon		and eliminate			
Lines 17-26	SPA	Jennifer Steenblock	Enactment	no	effective 6/30/05	no	Also, Withdraw Waiver Request	
Lines 17-20	017							
					yes - Withdraw			
Section 38, Page 33,	Eliminate SPA: 01-040 -	ļ	Upon		and eliminate			
Lines 27-30	Hospital UPL IGT	Patti Ernst-Becker	Enactment	no	effective 6/30/05	no		
					ves - Withdraw			
Continu 20 Dags 22	Eliminate SPA: Supp DSH 92-		Upon		and eliminate			
Lines 31-34	38 and Supp IME 93-011	Patti Ernst-Becker	1 .'	no	effective 6/30/05	no	·	
LHIES 3 1-34	Too and outby livit ag-out	T, att Effice Booker	1				!	

Houc 41
Tasks and amelines
Division IX - Corresponding Provisions DRAFT

						,	
	Eliminate SPA 04-001 UIHC Base Rate enhancement (one		Upon		yes - Withdraw and eliminate	. •	÷
	• · · · · · · · · · · · · · · · · · · ·	Patti Ernst-Becker	Enactment	no	effective 6/30/05	no	
Section 38, Page 34, Lines 10-17	Eliminate SPA 03-07 Physician IGT at UIHC Effective 7/1/03 to 6/30/05	Marty Swartz	Upon Enactment	no	yes - Withdraw and eliminate effective 6/30/05	no	
Lines 18-21	Eliminate SPA ??? For NFs prospective payment methodologies effective 6/30/05	Jennifer Steenblock	Upon Enactment	no	yes - Withdraw and eliminate effective 6/30/05	no	 ······································
Section 38, Page 34,	Waive EPSDT requirements for 19-21 year olds in expansion group	Sally Nadolsky	Upon Enactment	no	no	no	
Section 39, Page 34, Lines 28		No Impact	7/1/2005	no	no	no	
	Sections 249A.20B and 249A.34 are repealed	No Impact	7/1/2005	no	no	no	
Lines 31-33	2003 Iowa Acts, Chapter 112, section 4, Chapter 179,	No Impact					
	section 162 and 2004 lowa Acts, Chapter 1085, section 8 and section 10, subsection 5	·. · · · ·					
	are repealed		7/1/2005	no 👢	no	no	

House 41
Tasks and Timelines
Pharmacy Copayments DRAFT

,	Bill Section	Description	Staff Person Assigned	Effective Date(s)	Administrative Rules	Plan Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
Line	ion 42, Page 34, s 34-35 and							MANIC	
Page	35, Lines 1-35	Pharmacy Co-pays	Susan Parker	7/1/2005	no	yes	Ino	MMIS	

House Tasks and rimelines Division XI - OB-Newborns DRAFT

Bill Section	Description	Staff Person Assigned	Effective Date(s)	Administrative Rules	Plan Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
	OB/Newborn Care Program	T					Dept. of Public Health	
	for the indigent	Dept. of Public Health	7/1/2005	. [Programming	
Section 43, Page 35,							Dept. of Public Health	
Lines 31-35	Separate Fund	Dept. of Public Health	7/1/2005			ľ	Programming	
Section 43, Page 36,		Dept. of Cabile (10diti)					Dept. of Public Health	
Lines 1-2	Adopt Rules	Dept. of Public Health	7/1/2005	·			Programming	
Section 43, Page 36,		Dept. of Cabile Clean	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				Dept. of Public Health	
	County Quotas	Dept. of Public Health	7/1/2005		•		Programming	
Lines 3-11	County Quotas	Dept. of a delication	17.1.2000					
Section 43, Page 36,	Eligibility 1. NOT otherwise Medical eligible or 2. Med Needy without spenddown OR 3. Expansion OR 4. Maternal & Child Health Program	1	7/1/2005			1	Dept. of Public Health Programming	
Lines 30-35 and Page 37, Lines 1-8	At or below 185% FPL Spendown Resource Standards	Dept. of Public Health	7/1/2005				Dept. of Public Health Programming	
Section 43, Page 37,	Standardized Application						Dept. of Public Health	
Lines 9-15	Form	Dept. of Public Health	7/1/2005		· · · · · · · · · · · · · · · · · · ·		Programming	
Section 43, Page 37, Lines 16-18	Application Procedures	Dept. of Public Health	7/1/2005		· ·	T I	Dept. of Public Health Programming	
Section 43, Page 37, Lines 19-22	OB/Newborn care at any licensed hospital or health care facility	Dept. of Public Health	7/1/2005		·		Dept. of Public Health Programming	
Lines 23-27	Payment for services from the OB/Newborn Patient Care Fund	Dept. of Public Health	7/1/2005				Dept. of Public Health Programming	
Section 43, Page 37, Lines 28-32	Payments at Medicaid rates	Dept. of Public Health	7/1/2005			1	Dept. of Public Health Programming	
Lines 33-35 and Page 38, Lines 1-5	OB/Newborn Care Payments to Providers from patient Care Fund	Dept. of Public Health	7/1/2005				Dept. of Public Health Programming	
	Addresses reversion of fund	Dont of Bublic Hoolth	7/1/2005		-		Dept. of Public Health Programming	
Lines 6-12	and transfers	Dept. of Public Health	1/1/2005		 		riogramming	
	Hospitals still obligated to provide medical care and	no impost	7/1/2005				Dept. of Public Health Programming	
Lines 16-26	treatment	no impact	1/1/2003			L	1 TOGICATHINING	

House ,41 Tasks and Timelines Division XI - OB-Newborns DRAFT

Section 45 Page 38	Deletes reference to OB	no impact	<u> </u>				
	Indigent Care program at	Ino impact		1			1
Page 39, Lines 1-10				İ		Dept. of Public Health	
raye 39, Lines 1-10	OING		7/1/2005			Programming	
Section 46 Page 39	Deletes reference to OB	no impact					
	indigent care program at	ino impaot					}
	UIHC in conjunction with					Dept. of Public Health	Ì
	Medicaid Eligibility Dates		7/1/2005			Programming	ļ
	UIHC May charge for					Dept. of Public Health	
	Itransportation	no impact	7/1/2005			Programming	
	Authority to collect from	no mpaet	17172000				
	patients at UIHC (Hospital					Dept. of Public Health	1
	Care)	no impact	7/1/2005			Programming	1
	Authority to collect from	Tio impact	77 17 2000			Dept. of Public Health	
	patients at UI (Physician					Programming	
	Services)	no impact	7/1/2005	ł		1, 109.4	-
	Purchases in excess of	no impact	77172000			Dept. of Public Health	
	\$10,000 at UIHC	ino impaci	7/1/2005			Programming	
Lines 14-24	\$10,000 at OTHC		77 17 2000			, rogrammy	
Castian 40 Dags 40		·					1
Section 49, Page 40, Lines 25-35 and				İ		Dept. of Public Health	
	UIHC - TPL Collections	no impact	7/1/2005			Programming	1
			77172003			Dept. of Public Health	
	UIHC - Patients from other	no impact	7/1/2005	·		Programming	j
Lines 6-24	state institutions		11112003			Dept. of Public Health	-
Section 51, Page 41,			7/1/2005			Programming	
	UIHC - Parolees	no impact	1/1/2003			Dept. of Public Health	
. 5		no impact	7/1/2005	i		Programming	
	Care Program at UIHC		7/1/2005			Flogramming	
	Deleting Iowa Code	•				Dept. of Public Health	
	references to the Indigent		7/4/0005				
	Care Program at UIHC	no impact	7/1/2005			Programming	
	UIHC Obligation to serve	no impact		<u> </u>			ĺ
	indigent patients					Dept. of Public Health	
Page 43, Lines 1-43	·	-	7/4/0005			, ·	ľ
			7/1/2005		·	Programming	
	L	·				DHS Director to convene	
Section 61, Page 43,	Workgroup to review UIHCs					workgroup	
Lines 9-35 and Page	costs related to providing care		7,4,0005				ļ
		Director Concannon	7/1/2005				
	Report to Governor and					Report to Governor and General	
	General Assembly by					Assembly by 12/31/05	
Lines 7-13	12/31/05	Director Concannon	7/1/2005			<u> </u>	

House 41
Tasks and rimelines
Division XII - State Medical Institution DRAFT

			Effective	Administrative	Plan			0.0
Bill Section	Description	Staff Person Assigned	Date(s)	Rules	Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
Section 62, Page 44,	State Medical Institution				·	,	ŀ	
Lines 16-30	Collective Designation	PC Keen/Patti Ernst-Becker	7/1/2005	no	no	yes	none	
Section 62, Page 44,							·	
Lines 31-35 and								
Page 45, Lines 1-35		*						
and Page 46, Lines	Payment qualifications, bed						· .	
	totals, workgroup	PC Keen/Patti Ernst-Becker	7/1/2005	no	no	yes	none	
	DHS - Waiver to CMS If in						•	
	SMI: 1. Medicaid Coverage	PC Keen/Patti Ernst-						
Section 62, Page 46,	2. DSH Payments 3.	Becker/Lucinda Wonderlich-	Upon	yes - for DSH	yes - for DSH			
	ICF/MR fee	Fuller/Debbie Johnson	Enactment	Payments	Payments	yes	IABC, T19, MMIS, ISIS(?)	

Hou. Tasks and comelines Division XIII - Appropriations and Effective Dates DRAFT

Bill Section	Description	Staff Person Assigned	Effective Date(s)	Administrative Rules	Plan Amendment	1115 Waiver	Systems Changes - ACS/Other	Other
Section 63, Page	Description	Statt Ferson Assigned	Dutc(5)	Raise	7,11101101110	T		
46, Lines 25-35 and								
Page 47, Line1	UIHC	no impact	7/1/2005	no	no	no	27284584	
Section 63, Page	0110	no anpuot						
47, Lines 2-14	 Broadlawns	no impact	7/1/2005	no	no	no	40000000	
Section 63, Page								
47, Lines 15-33	Cherokee	no impact	7/1/2005	no	no	no	9098425	
Section 63, Page								
47, Lines 34-35 and			7/4/2005		200	no	1977305	
	Clarinda	no impact	7/1/2005	no	no	110	1977000	
Section 63, Page			7/1/2005	20	no	no	9045894	
, , , , , , , , , , , , , , , , , , , ,	Independence	no impact	7/1/2005	no	110	110	00,000.	
Section 63, Page	N. Blacast	-a impact	7/1/2005	no	no	no	5752587	
101	Mt. Pleasant	no impact	17172003	110	110	7.0	7,3233	
Section 64, Page	Approp. From account for	no impact	7/1/2005	no	no	no	136500	
	Health Care Transformation Medical Information Hotline	no impact	17 17 2000	110	110			
Section 64, Page	4	·						
48, Lines 29-32	for expansion population	1	7/4/0005			20	150000	
		no impact	7/1/2005	no .	no	no	130000	
Section 64, Page			7/1/2005		no	no	150000	
48, Lines 33-35	Insurance cost subsidy	no impact	1/1/2003	110	110	110	.00000	
Section 64, Page	Health Care Account Program	no impact	7/1/2005	no	no ·	no	50000	
49, Lines 1-3	Option	no impact	17 172000	110	110	110		
Section 64, Page 49, Lines 4-7	Electronic Medical Records	no impact	7/1/2005	no ·	no	no	100000	
Section 64, Page	Other Health Partnership	no impaot	., ., ., .			1.		
49, Lines 8-10	Activities	no impact	7/1/2005	no	no	no	550000	
49, Lines 0-10	Costs related to audits,							
Section 64, Page	performance evaluations and			i				
49, Lines 11-13	studies required by this Act	no impact	7/1/2005	no	no	no	100000	
Section 64, Page								
49, Lines 14-15	Administrative costs	no impact	7/1/2005	no	no	no	910000	
Section 65, Page	\$2M FROM: HealthCare	no impact						
49, Lines 16-22	Transformation TO:							
	IowaCare		7/1/2005	no	no	no	2000000	
Section 66, Page	Effective upon enactment: 1.	no impact					1	
49, Lines 23-32	Waiver Provisions (to CMS)	.						
1	2. SPA Sections 3. 28E							
	Agreements		7/1/2005	no	no	no	none	

House Tasks and timelines Division XIII - Appropriations and Effective Dates DRAFT

r 	Nothing effective unless	·	T	Τ	T	1		
	waivers and SPAs approved.						(
	If approved, all else effective							
	7/1/05	no impact		lno	no	no	none	
rage 50, Lines 1-7	Reduction of appropriations at							
	the MHIs and transfer to							
	Medicaid	no impact	7/1/2005	no	no	no		
00, 2,1100 0 20							272845	84
Section 66, Page	Reduction of appropriation at							
	UIHC and transfer to							
	Medicaid	no impact	7/1/2005	no	no	no		
Section 66, Page	Secion 10 - Board of Regents,	no impact						:
51, Lines 6-11	sub.2 - UI b-UIHC Section 12 -							
!	Supp DSH/GME							
				no	no	no		_
	Reduction of appropriation to							
1	Medicaid from the Hospital	, ```	7/4/2005			70	229000	00
* 11	Trust Fund	no impact	7/1/2005	orno	no	no	223000	
	Emergency Rules	no impact		no	no	no	none	
51, Lines 21-23	0.1.0			110	110	110	THOMAS	
1 '	Sole Source Contracting -	-						
1	Non-profit agencies should be	no impact		no	no	no ·	none	
4 11	Retroactive dates related to	no impact	 	110	110			
	lowa Code changes	Ino mpaor		1				
51, Lines 33-35 and Page 52, Lines 1-4	lowa Code changes							
Fage 52, Lilles 1-4		,	7/1/2005	no	no	no	none	
			 					

		•			
					* * * * * * * * * * * * * * * * * * * *
		•			•
Program	System	Date		Function	Start Date
СМН	IABC			IABC - Accept new Waiver code ('H')	
СМН	ISIS		6/29/2005	Identify CMH waiver clients and push activity into ISIS	
СМН	ISIS		6/30/2005	CMH workflows, services, in place and ready.	
СМН	TXIX		7/1/2005	Eligibility, MEDID card, Fiscal Agent file, Screen Data	
	1	ı		Daily / Month End processing for IowaPlan (834) Waiver	
СМН	TXIX	Phase 2		Indicator (eligibility)	7/5/2005
DSH	TXIX		7/5/2005	Accept new AID type (777) with letters.	
DSH	TXIX	Phase 2		TXIX - Month End eligibility, NO Card , Fiscal Agent	
FPW	FPW		29 - Jun-05	Create FPW NT Group and Populate for IM Workers	
FPW	FPW		29-Jun-05	Create FPW Security Table and Populate for Clinic Users	
FPW	FPW	 	29-Jun-05	Distribute Login Information	
FPW	FPW		30-Jun-05	Promote Web Application	
FPW	FPW			Run SQL Scripts	
FPW	FPW		30-Jun-05	Test Application (Intranet and Internet)	
FPW	FPW		1-Jul-05	Release application to the users via Field Web Site and URL	
FPW	FPW	· .		Clean up any major issues	
FPW	FPW		9/1/2005	Administrative Tool	
FPW	FPW		9/1/2005	Consolidate servers (intranet and internet	
FPW	FPW		9/1/2005	Minor bug fixes	
FPW	FPW		9/1/2005	Complete documentation	
FPW	FPW		1-Jan-06	Incorporate Help File	
FPW	FPW		1-Jan-06	Complete Administrative Tool	
FPW	FPW	•		NET conversion	•
FPW	FPW		1-Jan-06	Password Reset Functions for Clinic Workers	
FPW	FPW		1-Jan-06	Reprint of MedID cards	
' ' ' '				Allow List Return of State IDS to DHS workers, eliminating	
FPW	FPW	•	1-Jan-06	need for them to go into ST01 before coming into FPW.	
FPW	FPW			Implement Review Process	
FPW	FPW			Complete .NET conversion	
FPW	FPW			Update ST01 from FPW?	
FPW	FPW	Phase 2		Automatic enrollment of women with terminated pregnancies.	1
FPW	IABC			Changes to NOD reason codes, etc?	
FPW ·	IABC			Eligibility file merge with existing month end	
FPW	IABC			Month End NOD Merge	1
FPW	TXIX		7/1/2005	Eligibility, MEDID Card, Fiscal Agent File	

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1 Line 1					 	
lrogram	System	Date		Function	Start Date	
Program PW	TXIX	Phase 2		Only print one card per eligbility period (not monthly)	<u> </u>	
	FPW	Phase 2		Update of IABC Individual Master (defined above?)		
PW		Pliase 2	7/25/2005	Month End processing for Eligibility		7/5/2005
PW	TXIX	1		New AID Type	1	
owaCare	IABC		11312003	Auto member close or member paid record for IABC - Process	} ;	
	LARC			and apply to IABC	July / August	
owaCare	IABC IABC	•		Automatically close due to age limits.	July/August	
owaCare		Dhasa 2	0/3 1/2003	Tighten / relax edits depending on field response	,,	
owacare	IABC	Phase 2		If premiums need to be increased, it would be done through		
_	1400	Db 0		ABCC by SPIRS		
owaCare	IABC	Phase 2	•	Automate premium table		
owaCare	IABC	Phase 3		New edits as needed		
owaCare	IABC	Phase 3	7/0/0005	Mandatory Premium Indicator		
owaCAre	IABC			Case Master Changes		
owaCAre	IABC					
owaCAre	IABC			Medical Preimum History File		
owaCAre	IABC			IABC Batch	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
owaCAre	IABC		7/3/2005	IABC Online		
owaCare	TXIX			Eligibility, MEDID card and timing issuance, Fiscal Agent File		
owaCare	TXIX			Record Payments		
owaCare	TXIX			Apply Payments		
owaCare	TXIX			Premium Records		
owaCare	TXIX			Billing Statement Extract		
owaCare	TXIX		7/1/2005	Billing Statement Print		· · · · · · · · · · · · · · · · · · ·
owaCare	TXIX		7/1/2005	Screens - Payment, Member Detail, Summary, Balance, MIPC		
owaCare	TXIX			Month End Premium System Processing		7/5/2005
owaCare	TXIX	1		process retro month		7/5/2005
owaCare	TXIX		8/1/2005	Process hardship		7/5/2005
owaCare	TXIX		8/15/2005	Code for Friendly reminder		7/5/2005
owaCare	TXIX	Phase 2		Process premium for mandatory months		7/5/200
		· · · · · · · · · · · · · · · · · · ·		Track mandatory months for: eligibility, hardship, premiums		
owaCare	TXIX	Phase 2		and billing		7/5/2005
owaCare	TXIX	Phase 2		Screens for data displays		7/5/200
waCare	TXIX	Phase 2		HARDSHIP coding and processing		7/5/200
owaCare	TXIX	Phase 2		WIFS coded		7/5/2005
waCare	TXIX	Phase 2		Auto member close or member paid record for IABC		7/5/200
JwaCare	TXIX	1 11030 2				
					·	

Program	System	Date	Function	Start Date	
IowaCare	TXIX	Phase 2	Reports		7/5/2005
IowaCare	TXIX	Phase 2	TXIX Eligibility System/Month End process - Hardship		7/5/2005
IowaCare	TXIX	Phase 2	TXIX Eligibility System/Month End process - MEDIDS		7/5/2005
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			IM Worker -		
		.0	Statement Reprints		
		,	Application Screen		
			Payments Applied Screen		
			Unprocessed Payments		
			RETR Screen		•
IowaCare	TXIX	Phase 2	Member Ledger Screen		7/5/2005
			If IowaCare and Food Assistance were on the same case,		
			system coding will be added to stop reviews/recertification	•	
IowaCare	TXIX	Phase 2	dates from aligning between these programs.		
IowaCare	IABC		7/3/2005 Premium Calculation		
MHI Adult	IABC	Phase X	Accept new indicator for 'resident'		•
MHI Adult	IABC	Phase X	New medical aid type		
			Pull records from forms file based upon indicator and build	•	
MHI Adult	ISIS	Phase X	activities.	I	
MHI Adult	TXIX		7/1/2005 Daily processing - Eligibility, MEDID Card, Fiscal Agent File		
MHI Adult	TXIX	1	7/25/2005 Month end processing for elgibility, screen changes		7/5/2005
IowaCare	DW	Phase 2	Dashboard reports - Premium / Hardship		
Medicaid Reform	DW	Phase 2	Report for Medicaid -		